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_I.M. Smolen	(Depositor's name)
moler	(Signature)
Aug. 3, 2004	(Date)

APPLICATION NO.	FILING DATE	FIRST NAMED INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
09/811,323	03/16/2001	Michael German	UCSF048CON	7184

TITLE OF INVENTION: DELIVERY OF THERAPEUTIC GENE PRODUCTS BY INTESTINAL CELL EXPRESSION

APPLN. TYPE	SMALL ENTITY	S1330 S300 S300		TOTAL FEE(S) DUE	DATE DUE	
nonprovisional	NO			\$1630	08/05/2004	
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CFR 1.363).  Change of correspond Address form PTO/SB/1  "Fee Address" indicat	ee address or indication of "F lence address (or Change of C 22) attached. ion (or "Fee Address" Indica or more recent) attached. Us	Correspondence	2. For printing on the patent front page names of up to 3 registered patent agents OR, alternatively, (2) the name firm (having as a member a registered agent) and the names of up to 2 registorneys or agents. If no name is list will be printed.	attorneys or 1 Town of a single l attorney or 2 tered patent	nsend and nsend and Crew LI	
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